Appl. No. 09/715,690 § 1.312 Amendment dated July 22, 2007 Reply to Notice Of Allowance ma dd April 22 **PATENT** 42390P8842 JUL 2 6 2004 <u>ES PATENT AND TRADEMARK OFFICE</u> In re Application of: Examiner: Umez-Eronini, Lynette T. Anne E. Miller Art Unit: 1765 Serial No.: 09/715,690 Filed: November 16, 2000 COPPER POLISH SLURRY FOR For: REDUCED INTERLAYER DIELECTRIC **EROSION AND METHOD OF USING SAME** Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 AMENDMENT UNDER 37 C.F.R. § 1.312 Dear Sir: In response to the Notice of Allowance mailed on April 22, 2004, please amend the specification. FIRST CLASS CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed Mail Stop ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 22, 2004

Claire Wallters
Name of Person Mailing Correspondence

Claire Wallters

7 22 2004

Signature

Date

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pplication No.:09/715,690	AMENDMENT TRANSMITTAL	PATEN
First Named Inventor Anne E.	Miller ronini, Lynette T.	
An Amendment After Charge any fee not of X Applicant(s) hereby future reply that requappropriate length of CFR 1.16 and 1.17,	er Final Action (37 CFR 1.116) is attached and applicant(s) request overed by any check submitted to Deposit Account No. 02-2666. request and authorize the U.S. Patent and Trademark Office to (1) traires a petition for extension of time as incorporating a petition for efficient and (2) charge all required fees, including extension of time for any concurrent or future reply to Deposit Account No. 02-2666.	reat any concurrent or extension of time for the ees and fees under 37
ATTACHMENTS Preliminary Amendme		
Notice of Appeal	After Final Action (37 CFR 1.116) (reminder: consider filing a Noti	ice of Appeal)
Information Disclosure	on eminder: if executed by an attorney, the attorney must be properly o Statement (IDS)	f record)
Cross-Reference to Re	of Time nent (that includes a fee calculation based on the type and number of ated Application(s)	`claims)
Certified Copy of Prior X Other: Replacement S Other: Check(s)	ity Document heets, 8 sheets, 10 figures	
X Postcard (Return Recei	pt)	
BLAKELY SOKOLOFF TAYLOR OF TYPED OR PRINTED NAME: H		
SIGNATURE: Mollal ADDRESS: 12400 Wilshire Boulev	mard, Seventh Floor	22/04
Los Angeles, Calif	omia 90025	

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(10/14/03)

TELEPHONE NO.: (408) 720-8300